

and even death threats are common weapons against such journalists.

A key tool Mr. Fujimori uses against his opponents is the intelligence service, which was built up to combat terrorism. Wire-tapping of the President's critics is a specialty. Then there is the use of politically inspired prosecutions, like the trumped-up tax case against Delia Revoredo. She was dean of the Lima Bar Association and a member of the Constitutional Tribunal; her troubles began when she cast her vote there against a third term for Mr. Fujimori. She and her husband lived in exile for a year, until an arrest order against them was dropped. Bogus charges were about to be filed against Mr. Arrieta as well, and have been made in my case and others.

To get away with these types of things, the Government needs to control the entire judicial system. Today two-thirds of Peru's judges have only temporary status, meaning that they hold their positions at the pleasure of the Government and cannot act independently. In addition, the National Magistrates' Council, an autonomous body established in the Constitution to appoint and dismiss judges and prosecutors, has been largely gutted.

Mr. Fujimori is eliminating the checks and balances that make democracy possible. This is a disastrous course, for him and for Peru. Without the rule of law and freedom of expression, democracy in Peru will wither, foreign investors will be scared away, and instability will be guaranteed. True friends of Peru like the United States should be driving that message home to Mr. Fujimori during his visit to Washington this week.

[From the Washington Post, Feb. 4, 1999]

MORE THAN A BORDER TREATY

The presidents of Peru and Ecuador are in town to celebrate the signing of a border treaty that is a lot more than a border treaty. It enables them to ask Americans not just to recognize their diplomacy but also to invest in their growth and stability. The two countries need development as well as friendship. Settling what has been called the oldest and most contentious conflict in South America lets the peacemakers advertise themselves as serious modernizers. The new agreement was designed precisely as an instrument of modernization for both of them.

Border disputes come from more than the lapses of surveyors. This one came from historical and emotional roots deep enough to touch basic sources of identity as well as interest on both sides. The tenacity of nationalistic feelings made it risky but essential for Ecuador's president, Jamil Mahuad, and Peru's Alberto Fujimori to grasp the nettle. This is how an agreement came to be negotiated that marks a border and provides Ecuador a patch of Amazonian land to honor its soldier dead. The agreement also provides a plan to develop and integrate the two economies, especially in the impoverished border region. Initial funding is what the presidents seek in Washington.

For all their psycho-diplomatic exertions, Peru and Ecuador needed help from their friends, Argentina, Brazil, Chile and the United States. The four arbitrated the final settlement that the two had bound themselves to accept. Ecuador and Peru deserve congratulations. Mr. Fujimori could build on the spirit of the occasion by moving all the way to undo his manipulation of the powers of the state against television proprietor Baruch Ivcher, in a case with international resonance. The dispute on that "border" needs to be resolved, too.

1999 CONGRESSIONAL OBSERVANCE OF AFRICAN AMERICAN HISTORY MONTH—FRANCE EXPRESSES GRATITUDE TO UNITED STATES VETERANS OF WORLD WAR I

SPEECH OF

HON. CHARLES B. RANGEL

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Wednesday, February 10, 1999

Mr. RANGEL. Mr. Speaker, as we celebrate African American History Month, I would like to take this opportunity to offer a particular tribute to two great African American World War I Veterans, who are residents of Harlem. Both served on active duty in France.

Although 80 years later, Mr. Herbert W. Young, now 112 years old, and Mr. Robert Thomas, now 103 years old, will receive the French Legion of Honor Medal on February 22, 1999, during a special ceremony in their honor. The ceremony will be held at the French Consulate in New York. Both men plan to attend. Mr. Young is recognized as the oldest living veteran.

Mr. Young served in the United States Army, Company E, 807th Pioneer Infantry from August 1, 1918 through July 11, 1919, and attained the rank of Corporal. Mr. Thomas served in the United States Army, Company A, 815th Pioneer Infantry from July 11, 1917, through August 7, 1919, and attained the rank of Private.

The French government will mark the upcoming 80th anniversary of the Armistice of World War 1 by conferring the Legion of Honor on Americans, in particular, and other allied veterans of the Great War. The Legion of Honor is France's highest decoration, and is being awarded to veterans who took part in the 1914–1918 war on French soil.

The United States entered World War 1 "to make the world safe for democracy." Although African Americans were denied democratic rights in the United States, they supported the war effort in surprising numbers. W.E.B. Du Bois, editor of *The Crisis*, called on African Americans to "close ranks" despite segregation, hoping that military participation would earn African American civil rights after the war. Upon demobilization, African Americans returned to their homes to face continued segregation, discrimination and racial violence.

All Americans owe a special debt of gratitude to these two men. Despite segregation, discrimination, and bitter disappointment, they defended American's freedom and democracy with their very lives. We salute them, we honor them, we thank them for the unselfish and extraordinary sacrifices, and contributions they made to the country and the world.

INTRODUCTION OF THE MEDICARE SUBSTITUTE ADULT DAY CARE SERVICES ACT

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, February 11, 1999

Mr. STARK. Mr. Speaker, I am pleased to rise with a number of my colleagues to introduce The Medicare Substitute Adult Day Care Services Act. This bill would improve home

health rehabilitation options for Medicare beneficiaries and simultaneously assist family caregivers with the very real difficulties in caring for a homebound family member.

As Congress turns needed attention to modernizing the Medicare program, this bill is an important step in that direction. It would update the Medicare home health benefit by allowing beneficiaries the option of choosing an adult day care setting for the provision of home health benefits rather than confining the provision of those benefits solely to the home.

More specifically, the Medicare Substitute Adult Day Care Services Act would incorporate the adult day care setting into the current Medicare home health benefit. It would do so by allowing beneficiaries to substitute some, or all, of their Medicare home health services in the home for care in an adult day care center (ADC).

To achieve cost-savings, the ADC would be paid a flat rate of 95 percent of the rate that would have been paid for the service had it been delivered in the patient's home. The ADC would be required, with that one payment, to provide a full day care to the patient. That care would include the home health benefit AND transportation, meals and supervised activities.

Above the 95 percent reimbursement limitation there are additional inherent cost savings in the ADC setting. In the home care arena, a skilled nurse, a physical therapist, or any home health provider must travel from home to home providing services to one patient per site. There are significant transportation costs and time costs associated with that method of care. In an ADC, the patients are brought to the providers so that a provider can see a larger number of patients in a shorter period of time. That means that payments per patient for skilled therapies can be reduced in the ADC setting compared to the home health setting.

As an added budget neutrality measure, the bill includes a provision that would allow the Secretary of Health and Human Services to change the percentage of the payment rate for ADC services if growth in those services were to be greater than current projections under the traditional home health program.

This bill is not an expansion of the home health benefit. It would not make any new people eligible for the Medicare home health benefit. Nor would it expand the definition of what qualifies for reimbursement by Medicare for home health services.

In order to qualify for the ADC option, a patient would still need to qualify for Medicare home health benefits just like they do today. They would need to be homebound and they would need to have a certification from a doctor for skilled therapy in the home.

All the bill would do is recognize that ADC's can provide the same services, at lower costs, and include the benefits of social interaction, activities, meals, and a therapeutic environment in which trained professionals can treat, monitor and support Medicare beneficiaries who would otherwise be at home without professional help. All of these things aid the rehabilitation process of patients.

The bill includes important quality and anti-fraud protections. In order to participate in the Medicare home care program, adult day care centers would be required to meet the same standards that are required of home health agencies. The only exception to this rule is